What is Paget’s disease of bone?
It is a disorder of bone in which the normal maintenance system that keeps bones healthy breaks down. There is usually a constant turnover of bone cells but in Paget’s disease new bone is produced faster than the old bone is broken down. The new bone tissue is softer and more fragile because it is filled with blood vessels and fibrous tissue. The affected bones become enlarged and misshapen. The cause is unknown but a viral cause is suspected.

How common is Paget’s disease and who gets it?
It is quite common. In Western countries about two people in 100 over 40 have it, but it increases to at least one in 10 over the age of 80. However, it causes problems in only 10% of those affected.

It can affect both sexes but is twice as common in men as women. It has a tendency to show up in certain population groups, being more prevalent among Anglo-Saxons, especially those from the north of England.

There is a definite hereditary tendency as there is an increased risk of getting Paget’s disease in those with a family history of it.

Which bones are affected?
Paget’s can occur in any bone and may be present in just one or in several bones. The bones most frequently affected (in approximate order) are the hip bone (pelvis), the thigh bone (femur), the shin bone (tibia), the skull, spinal bones (vertebrae), the humerus (arm) and the collarbone (clavicle).

What are the symptoms?
Paget’s disease does not always produce troubling symptoms (only one in 10-20 cases). When it does, bone pain (usually in the spine or legs) is the most common and this may be mild but often is typically a deep, dull ache, especially at night. Other symptoms include joint pain and stiffness (particularly of the hips and knees), difficulty walking, deafness and headache (if the skull is involved).

Signs
The bones may become misshapen, causing problems such as bowed legs or an enlarged skull — “hats don’t fit any more”. People may walk with a waddling gait. The skin over the bone may feel warm.

It is easily diagnosed by special blood tests and X-rays.

What are the risks?
The weakened bones are more likely to break and, rarely, a tumour can develop in the affected bone. Deafness can occur from pressure on a nerve from the enlarged skull. The increased blood flow through the bones can cause heart failure or high blood pressure.

Who should be treated?
Many people who have no symptoms need no special treatment, especially the elderly. Relatively young patients and those with symptoms predominantly in the legs and spine will require treatment.

What is the treatment?
General measures:
• Keep to a healthy diet, especially with ample fruits and vegetables of all types, wholegrain breads and cereals.
• Get adequate rest during a difficult period of pain, but generally keep as active as normal.
• Take simple analgesics such as paracetamol for pain.

Medication
In the past there was little specific treatment for Paget’s disease. There are now at least three groups of drugs, but a group called bisphosphonates is preferred. They have revolutionised treatment and can be taken by mouth or given by injection. Your doctor will advise about the best drug and any possible side effects. The outlook with these new drugs is very good.